



CONFIRMATION NO. 2054

Bib Data Sheet

SERIAL NUMBER 10/086,289	FILING DATE 03/01/2002 RULE	CLASS 381	GROUP ART UNIT 2644	ATTORNEY DOCKET NO. P02,0077
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

None *TMJ*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

GERMANY 10110258.5 03/02/2001 *TMJ*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/26/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Signature <i>Terry M. Jellison 11/16/04</i> Initials <i>TMJ 11/16/04</i>					

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## TITLE

Method for the operation of a hearing aid device or hearing device system as well as hearing aid device or hearing device system

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input checked="" type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees ( Filing ) <input checked="" type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input checked="" type="checkbox"/> 1.18 Fees ( Issue ) <input checked="" type="checkbox"/> Other
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